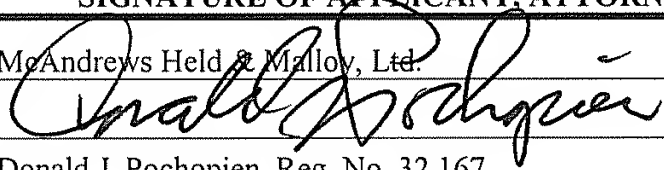
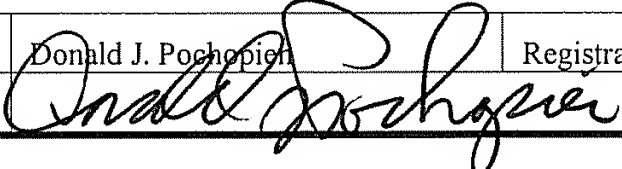
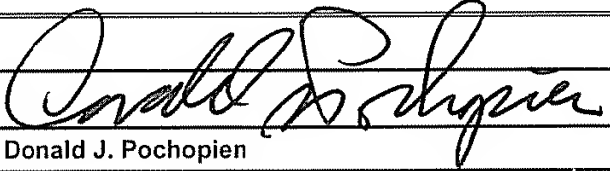


TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number		09/976,556	
		Filing Date		October 11, 2001	
		First Named Inventor		Wironen, et al.	
		Art Unit		1651	
		Examiner Name		Leon B. Langford, Jr.	
		Attorney Docket Number		1915/13987US04	
Total Number of Pages in This Submission		23			
ENCLOSURES (check all that apply)					
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response Under 37 CFR §1.116 with Exhibits A-C attached thereto <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request – 2 months <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD		<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):	
Remarks					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm		McAndrews Held & Malloy, Ltd.			
Signature					
Printed Name		Donald J. Pochopien, Reg. No. 32,167			
Date		August 21, 2006			
CERTIFICATE OF MAILING					
I hereby certify that this correspondence is being sent via electronic filing to the United States Patent and Trademark Office on August 21, 2006.					
Name (Print/type)		Donald J. Pochopien		Registration No. (Attorney/Agent)	
Signature				Date	
				32,167	
				August 21, 2006	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004 Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818).			Complete if Known					
<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2006</h2>			Application Number	09/976,556				
			Filing Date	October 11, 2001				
			First Named Inventor	Wironen, et al.				
			Examiner Name	Leon B. Langford, Jr.				
			Art Unit	1651				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			Attorney Docket No.	1915/13987US04				
TOTAL AMOUNT OF PAYMENT (\$) 450.00								
METHOD OF PAYMENT (check all that apply)								
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____								
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>13-0017</u> Deposit Account Name: <u>McAndrews Held & Malloy</u>								
For the above-identified deposit account, the Director is hereby authorized to (check all that apply)								
<input checked="" type="checkbox"/> Charge Fee(s) indicated below <input type="checkbox"/> Charge Fee(s) indicated below, except for the filing fee								
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fees(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILING FEES		SEARCH FEES		EXAMINATION FEES			
Application Type	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fees Paid(\$)	
Utility	300	150	500	250	200	100	_____	
Design	200	100	100	50	130	65	_____	
Plant	200	100	300	150	160	80	_____	
Reissue	300	150	500	250	600	300	_____	
Provisional	200	100	0	0	0	0	_____	
2. EXCESS CLAIM FEES							Small Entity	
Fee Description							Fee(\$)	Fee(\$)
Each claim over 20 (including Reissues)							50	25
Each independent claim over 3 (including Reissues)							200	100
Multiple dependent claims							360	180
Total Claims		Extra Claims		Fee(\$)	Fee Paid (\$)		Multiple Dependent Claims	
_____ -20 or HP		_____ x		_____ =	_____		Fee	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20								
Indep. Claims		Extra Claims		Fee(\$)	Fee Paid (\$)			
_____ -3 or HP		_____ x		_____ =	_____			
HP = highest number of independent claims paid for, if greater than 3								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee(\$)	Fee Paid(\$)	
_____ -100		_____ /50		_____ (round up to a whole number) x		_____ =	_____	
4. OTHER FEE(S)								
Non-English Specification, \$130 fee (no small entity discount)							_____	
Other (e.g., late filing surcharge): <u>Petition For 2 Month Extension Of Time</u>							450.00	
SUBMITTED BY								
Signature				Registration No. (Attorney/Agent)		32,167	Telephone (312)775-8000	
Name (print/type)		Donald J. Pochopien				Date		August 21, 2006